

U.S. DEPARTMENT OF THE INTERIOR  
NATIONAL PARK SERVICE

**APPLICATION FOR EMERGENCY LAW AND ORDER FUNDING**

\_\_\_\_\_  
(Date)

WASO CONTROL # \_\_\_\_\_  
(Leave Blank)

ACCOUNT # \_\_\_\_\_ - \_\_\_\_\_ -168  
(Leave Blank)

NAME OF INCIDENT: \_\_\_\_\_ PARK: \_\_\_\_\_

BEGINNING DATE: \_\_\_\_\_ ENDING DATE: \_\_\_\_\_  
(Estimated / Actual) (Estimated / Actual)

ESTIMATED COST: \$ \_\_\_\_\_

PURCHASE OF EQUIPMENT REQUESTED: YES ☐ NO ☐  
(If yes, include item(s) requested and costs in your justification)

BRIEF DESCRIPTION OF INCIDENT:

WHEN DID NPS BECOME AWARE OF ACTIVITY? \_\_\_\_\_  
(Time / Day / Date)

HAS NPS GRANTED PERMIT FOR ACTIVITY? YES ☐ NO ☐  
(If yes, attach copy of justification)

ACTIVITY SPONSORED BY: \_\_\_\_\_  
(Name)

HAS THIS ACTIVITY OCCURRED PREVIOUSLY? YES ☐ NO ☐  
(If yes, specify date(s)) \_\_\_\_\_  
(Prior date(s), if applicable)

WILL COSTS FOR THIS ACTIVITY BE REIMBURSED? YES ☐ NO ☐  
(If not reimbursed, briefly explain why)

CAN REGIONAL FUNDS BE REPROGRAMMED? YES ☐ NO ☐  
(If no, indicate why on separate page)

Requested By: \_\_\_\_\_  
(Superintendent's Signature) (Date)

Concurred By: \_\_\_\_\_  
(Regional Budget Officer's Signature) (Date)

Concurred By: \_\_\_\_\_  
(Regional Director's Signature) (Date)

FOLLOWING INFORMATION TO BE COMPLETED AT WASO

REGION REQUESTING FUNDS: AR ☐ MWR ☐ SWR ☐ NER ☐ IMR ☐ PWR ☐ NCR ☐  
(Check Box)

INITIAL NOTIFICATION BY: \_\_\_\_\_  
(Name) (Time / Day / Date)

RECEIVED BY: \_\_\_\_\_  
(Name)

TELEPHONE APPROVAL GRANTED: YES ☐ NO ☐ \_\_\_\_\_  
(If yes, give Date and Time)

Request Reviewed By: \_\_\_\_\_  
(NPS Budget Officer's Signature) (Date)

COMMENTS (IF ANY)

APPROVED ☐  
DISAPPROVED ☐

Equipment Purchase Authorized: YES ☐  
NO ☐

Approving Official: \_\_\_\_\_  
(Signature) (Date)

NOTE: This two (2) page application must be completed and forwarded  
to WASO along with the written plan and justification